

**REMARKS**

Claims 1-24 are pending prior to entering the instant amendments.

**The Amendments**

Claim 1 is amended to incorporate Claim 22. Accordingly, Claim 22 is canceled.

Claims 5, 6, and 21 are canceled.

No new matter is added in the amendment. The Examiner is respectfully requested to enter the amendment.

**The Response**

**Claim Objection**

Claim 20 is objected to because of the informalities. The Examiner states that the abbreviations for the "mononucleoside triphosphate" should be preceded in their first occurrence by the specific identity of the entities. The objection is respectfully traversed.

MPEP 2173.01 states that Applicants are their own lexicographers and they can define in the claims what they regard as their invention essentially in whatever terms they choose so long as any special meaning assigned to a term is clearly set forth in the specification. Applicants may use alternative expressions, or any style of expression or format of claim which makes clear the boundaries of the subject matter for which protection is sought. A claim may not be rejected solely because of the type of language used to define the subject matter.

In the specification at page 14, line 25 through page 15, line 19, Applicants have defined the abbreviation and full index name of each claimed mononucleoside triphosphate compound. Accordingly, the objection to Claim 20 should be withdrawn.

**35 U.S.C. 112, First Paragraph Rejection**

Claims 1-19 are rejected under 35 U.S.C. 112, first paragraph, because the specification, while enabling the effects of UP<sub>4</sub>dC, allegedly does not reasonably provide enablement for a method of treating edematous disorders in a subject by administering compound of Formula I.

Claims 5 and 6 are canceled. Although Applicants do not agree with the rejection, in order to accelerate the allowance of the application, Applicants have amended Claim 1 to limit

the dinucleotide compound to UP<sub>4</sub>dC. Accordingly, the 35 U.S.C. 112, first paragraph rejection of Claims 1-4 and 7-19 should be withdrawn.

### **Obvious-type Double Patenting Rejections**

Claims 1-24 are rejected under the judicially created doctrine of obviousness-type double patenting as being unpatentable over claims 1-18 of U.S. Patent No. 6,696,425; Claims 1-15 of U.S. Patent 6,673,779; Claims 1-34 of U.S. Patent 6,596,725; Claims 11-20 of U.S. Patent 6,555,675; and Claims 4-9 of U.S. Patent 6,348,589.

Claims 5, 6, 21 and 22 are canceled.

Applicants are submitting herewith a Terminal Disclaimer over U.S. Patent No. 6,348,589 to overcome the obvious-type double-patenting rejection over the '589 Patent. As to the other patents, the rejection is traversed for the following reasons.

Claims 1-18 of U.S. Patent No. 6,696,425 are directed to a method of stimulating tear secretion and mucin production in eyes of a subject. A method of stimulating tear secretion and mucin production is a method to treat dry eye diseases; whereas a method of treating edematous retinal disorders is a method for removing pathological fluid accumulation in subretinal and intra-retinal spaces. Accordingly, the instant claims are different from, and are not an obvious variation of, the patented claims.

Claims 1-15 of U.S. Patent 6,673,779 are directed to a method of treating primary ciliary dyskinesia. Primary ciliary dyskinesia (PCD) is a congenital disease characterized by ultrastructural defects and motility disturbances of cilia, resulting in either absent or abnormal ciliary movement. The most common clinical manifestations of PCD are chronic respiratory disease (e.g., sinusitis, rhinitis, and bronchiectasis) and otitis media. A method of treating PCD is different from a method of treating edematous retinal disorders. Accordingly, the instant claims are not an obvious variation of the patented claims.

Claims 1-34 of U.S. Patent 6,596,725 are directed to a method of treating edematous retinal disorders, retinal detachment, or retinal edema, in a subject. The method comprises administering a dinucleoside polyphosphate compound of Formula I, wherein R<sub>6</sub> (6-purine position) is selected from the group consisting of: hydroxy, oxo, mercapto, C<sub>1-4</sub> alkoxy, C<sub>7-12</sub> arylalkoxy, C<sub>1-6</sub>alkylthio, S-phenyl, C<sub>1-5</sub> disubstituted amino, triazolyl,

C<sub>1-6</sub>alkylamino, and di-C<sub>1-4</sub>alkylamino wherein said dialkyl groups are optionally linked to form a heterocycle or linked to N<sub>3</sub> to form a substituted ring. R<sub>6</sub> does not include amino, thus the dinucleoside polyphosphate compounds of the patented claims do not include P<sup>1</sup>-(2'-deoxycytidine 5'-)-P<sup>4</sup>-(uridine 5'-)tetraphosphate, in which R<sub>6</sub> is an amino. Accordingly, the instant claims are different from, and are not an obvious variation of, the patented claims.

Claims 11-20 of U.S. Patent 6,555,675 are directed to a method of treating edematous retinal disorders comprising administering a novel dinucleoside polyphosphate compound; wherein the novel compound is (a) a compound comprising a specific furanosyl sugar moiety of 2', 3'-dideoxyribofuranosyl, 3'-deoxyarabinofuranosyl, xylofuranosyl, 2'-deoxyxylofuranosyl, or lyxofuranosyl; (b) an azapurine in which J is nitrogen; or (c) a purine wherein the 6-position is not amino. The compounds in the patented claims do not include P<sup>1</sup>-(2'-deoxycytidine 5'-)-P<sup>4</sup>-(uridine 5'-)tetraphosphate, which does not comprise the above-identified specific furanosyl sugar moiety, is not an azapurine, and has an amino moiety on the 6-purine position. Accordingly, the instant claims are different from, and are not an obvious variation of, the patented claims.

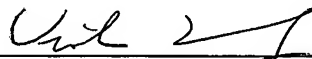
Therefore, the Obvious-type Double Patenting Rejections of Claims 1-4, 7-20, 23 and 24 over U.S. Patent No. 6,696,425; 6,673,779; 6,596,725; 6,555,675; and 6,348,589 should be withdrawn.

**CONCLUSION**

Applicants believe that the application is now in good and proper condition for allowance. Early notification of allowance is earnestly solicited.

Respectfully submitted,

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Enclosure: Terminal Disclaimer

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